

DEC 19 2005

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0831-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1996, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/988854-Conf. #9383
	Filing Date	November 19, 2001
	First Named Inventor	John TELOH
	Art Unit	2165
	Examiner Name	N.Jalil-Abel
Total Number of Pages In This Submission	Attorney Docket Number	SMQ-082CN2/P6396CNT1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): -Pre-Appeal Brief Req. for Review -Certificate of Transmission
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	LAHIVE & COCKFIELD, LLP		
Signature	<i>David R. Burns</i>		
Printed name	David R. Burns		
Date	December 19, 2005	Reg. No.	48,590

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300 at MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: December 19, 2005

Signature:

David R. Burns

(David R. Burns)

PTO/SB/97 (08-04)

Approved for use through 07/31/2006. OMB 0651-0031

U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (if known): 09/988854

Attorney Docket No.: SMQ-082CN2/P6396CNT1

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on December 19, 2005
Date



Signature

David R. Burns

Typed or printed name of person signing Certificate

46,590

Registration Number, if applicable

(617) 227-7400

Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Fee Transmittal (1 page in duplicate)
Notice of Appeal (1 page)
Pre-Appeal Brief Request for Review (1 page)
Three Month Extension of Time (1 page)
Transmittal (1 page)
Charge \$1520.00 to deposit account 12-0080
Certificate of Transmission (1 page)

DEC 19 2005

FAX TRANSMISSION**DATE:** December 19, 2005**PTO IDENTIFIER:** Application Number 09/988854-Conf. #9383
Patent Number**Inventor:** John TELOH et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** LAHIVE & COCKFIELD, LLP

David R. Burns

PHONE: (617) 227-7400**Attorney Dkt. #:** SMQ-082CN2/P6396CNT1**PAGES (Including Cover Sheet):** 7**CONTENTS:** Fee Transmittal (1 page in duplicate)
Notice of Appeal (1 page)
Pre-Appeal Brief Request for Review (1 page)
Three Month Extension of Time (1 page)
Transmittal (1 page)
Charge \$1520.00 to deposit account 12-0080
Certificate of Transmission (1 page)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (617) 227-7400 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

LAHIVE & COCKFIELD, LLP
28 State Street, Boston, Massachusetts 02109
Telephone: (617) 227-7400 Facsimile: (617) 742-4214